INSTRUCTIONS FOR COMPLETION AND SUBMISSION OF FORM U-10

- 1. Complete Items 1-6 in full. Identify the examination(s) being requested under Item 7. Failure to complete all items will cause the application to be returned unprocessed.
- 2. Attach a single check or money order made payable to NASD Regulation, Inc. for the total amount of examination fees due. Print the candidate's and firm's name on the face of the check.

NOTE: Examination fees are NOT REFUNDABLE.

3. Send the fully completed Form U-10 together with your check or money order for the total examination fees due to:

NASD Regulation, Inc. • P.O. Box 9401 • Gaithersburg, Maryland 20898-9401 • Attn: Examination Section

4. Form U-10 will not be processed until the necessary authorization is provided directly to NASD Regulation by the appropriate regulatory authority. If the required authorization is not received from the appropriate regulatory authority within thirty (30) days of the date of receipt, Form U-10 will be returned unprocessed.

SCHEDULING/ENROLLMENT INFORMATION

- 1. Examination enrollment confirmations and examination results will be provided to the firm named in Item 4 at the address and to the attention of the contact person as shown in Item 5. Responsibility lies with the recipient of the grade results to make and disseminate copies to the candidate and appropriate regulatory authorities. NASD Regulation assumes no responsibility for providing copies of results to the regulatory authorities.
- 2. Examination fees and enrollments are NOT TRANSFERABLE to another individual or test for the same individual.
- 3. Examination enrollments are valid for 120 calendar days only. Persons without valid enrollments will not be permitted to take an examination. Candidates must make the necessary appointment and take the examination before the expiration date as shown on the enrollment confirmation or the enrollment expires and the fee is forfeited.
- **4.** To re-enroll for a failed examination, forfeited enrollment or an expired enrollment, resubmit Form U-10 and the appropriate examination fee(s).

EXAMINATION ADMINISTRATION INFORMATION

Exam and training sessions are provided at several authorized NASD Regulation testing centers throughout the United States. Complete information concerning examination administration, test center locations and admittance requirements will be mailed with the Candidate's Enrollment Confirmation. For additional information, contact the NASD Regulation Gateway Call Center, at (301) 590-6500 or you can access the current list of authorized NASD Regulation testing centers on the NASD Regulation Web Site at www.nasdr.com.

Candidates must contact the appropriate testing center to make an appointment. Appointments cannot be made until examination enrollment confirmations are received. If, for any reason, a candidate cannot make a scheduled appointment, the appointment must be cancelled. Responsibility rests with the candidate or firm to make and/or cancel appointments on a timely basis directly with the appropriate testing center. The examination enrollment and fee will be forfeited if an appointment is not cancelled in accordance with the required notification criteria, the candidate fails to appear for an appointment or arrives at the test center so late that his/her session cannot begin without disrupting the center schedule for that date. If a holiday occurs during the normal cancellation period, this schedule adjusts to define "timely cancellation" as one day earlier than stated below. Cancellation will be considered timely if effected according to the following schedule:

| If appointment is scheduled for: | ancellation must be effected no later than noon on: |
|---|--|
| Monday. Frice Tuesday Sat Wednesday. Mo Thursday Tues Friday We Saturday. The | turday of the preceding week onday of the same week esday of the same week ednesday of the same week |

FORM U-10

UNIFORM EXAMINATION REQUEST FOR NON-NASD CANDIDATES

Prior to completing this form please refer to the instructions on page 1 regarding completion, enrollment confirmation, grade results, and examination administration information.

ELIGIBILITY OF CANDIDATES

Form U-10, the Uniform Examination Request for non-NASD Candidates, is designed for use by individuals not employed or associated with NASD member firms who, as part of a registration process, have been specifically required by another regulatory authority to qualify by examination. (Persons seeking NASD registration must be employed by or associated with an NASD member firm. All examination schedulings for persons associated with NASD member firms or firms applying for NASD membership must be made by the firm on Form U-4.)

Responsibility rests with the candidates and their firms to: 1) ascertain directly from the appropriate regulatory authority specific advice as to which qualifying examination is required; 2) provide the necessary registration application to that agency in accordance with their requirements; and 3) determine what that regulator requires of them before the agency will provide NASD Regulation with the necessary authorization to proceed with Form U-10 processing and test scheduling.

NASD Regulation assumes no responsibility for contacting another regulatory agency with respect to provision of the required authorization or the candidate's choice of examination.

| 1. Candidate's Name | | 2. Social Se | 2. Social Security No. | | | |
|--|------------------|---------------------------------|----------------------------|------------------|--|--|
| | | | | | | |
| 3. Candidate's Home Addre | ess | | | | | |
| | Street | City | State | Zip | | |
| 4. Firm Name | | | | | | |
| 5. Firm Address | | | | | | |
| | Street | City | State | Zip | | |
| Firm Contact and Telephon | e Number | | | | | |
| | | Name | Telephone | | | |
| qualification/registration O American Stock Excha | | │ ○ State of (identify t | he State and the regulato | ory agency) | | |
| O Chicago Board Option | s Exchange | | | | | |
| O Comptroller of the Cu | rrency | | | | | |
| O Federal Deposit Insura | ance Corporation | | | | | |
| O Federal Reserve Board | d | O OTHER (indicate t | he full name of the regula | atory authority) | | |
| O Midwest Stock Exchar | nge | | | | | |
| O National Futures Asso | ociation | | | | | |
| O New York Stock Excha | inge | | | | | |
| O Pacific Stock Exchange | je | | | | | |
| O Philadelphia Stock Ex | change | | | | | |

- 7. Check the appropriate box(es) beside each examination to be scheduled. The applicable exam fee follows each test.
 - A. The following examinations will be scheduled and administered by NASD Regulation only when the required authorization is received directly from the respective State Administrator or self-regulatory organization identified under Item 6. These examinations are available only to individuals who have made application for registration with a state regulator or SRO and are specifically required by the regulator to qualify by one of these examinations.

| 0 | Series 4 | Registered Options Principal | \$75 |
|---|-----------|-----------------------------------|-------|
| 0 | Series 5 | Interest Rate Options | \$60 |
| O | Series 6 | Investment Company and | |
| | | Variable Contracts Products | |
| | | Representative | \$60 |
| 0 | Series 7 | General Securities Representative | \$200 |
| 0 | Series 9 | General Securities Sales | |
| | | Supervisor-Options Module | \$50 |
| 0 | Series 10 | General Securities Sales | |
| | | Supervisor-General Module | \$60 |
| 0 | Series 11 | Assistant Representative- | |
| | | Order Processing | \$60 |
| O | Series 15 | Foreign Currency Options | \$60 |
| О | Series 22 | Direct Participation Programs | |
| | | Representative | \$60 |
| 0 | Series 24 | General Securities Principal | \$75 |
| 0 | Series 26 | Investment Company and Variable | |
| | | Contracts Products Principal | \$75 |

| 0 | Series 27 | Financial and Operations Principal | \$75 |
|---|-------------|--|------|
| О | Series 28 | Introducing Broker/Dealer Financial and Operations Principal | \$75 |
| 0 | Series 39 | Direct Participation | |
| | | Programs Principal | \$75 |
| 0 | Series 42 | Registered Options | |
| | | Representative | \$60 |
| O | Series 55 | Limited Representative | |
| | | Equity Trader | \$60 |
| 0 | Series 62 | Corporate Securities | |
| | | Representative | \$60 |
| 0 | Series 72 | Government Securities | |
| | | Representative | \$60 |
| O | Other (Plea | ase specify test series number and nai | me): |
| | | | |
| | | | |
| | | | |
| | | | |

B. The following examinations will be scheduled only for individuals associated with municipal securities dealers registered with the bank regulatory agency identified under Item 6.

| 0 | Series 52 | Municipal Securities Representative | \$60 |
|---|-----------|-------------------------------------|------|
| 0 | Series 53 | Municipal Securities Principal | \$75 |

C. The following examinations **do not** require authorization from a State Administrator or self-regulatory organization.

| 0 | Series 3 National Commodities Futures | | \$75 |
|---|---------------------------------------|--|-------|
| 0 | Series 30 | Branch Managers Examination-Futures | \$60 |
| 0 | Series 31 | Futures Managed Funds Examination | \$60 |
| 0 | Series 32 | Limited Futures Examination-Regulation | \$60 |
| 0 | Series 33 | Financial Instruments Examination | \$60 |
| 0 | Series 63 | Uniform Securities Agent State Law Examination | \$70 |
| 0 | Series 65 | Uniform Investment Advisor Law Examination | \$110 |
| О | Series 66 | Uniform Combined State Law Examination | \$110 |

D. Continuing Education Computer-Based Training Programs

| O Continuing Education Regulatory Element General Program | \$65 |
|---|------|
|---|------|

O Continuing Education Regulatory Element Supervisors Program \$65

Do not detach this page.

| For NASD Regulation Use Only | | | | |
|-------------------------------|--------|-------------|--|--|
| Please do not write in this a | area. | | | |
| Amount of Payment Enclos | ed: \$ | | | |
| EXAM REQUESTED | AMOUNT | ACCOUNT NO. | | |
| | | | | |
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| | | | | |
| | | | | |

| 1. Candidate's Name | | 2. Social Security No. | | | |
|--------------------------------|-----------------------------|------------------------|-----------|-----|--|
| 3. Candidate's Home Address | 3. Candidate's Home Address | | | | |
| | Street | City | State | Zip | |
| 4. Firm Name | | | | | |
| 5. Firm Address | | | | | |
| | Street | City | State | Zip | |
| Firm Contact and Telephone Nur | mber | | | | |
| | Name | | Telephone | | |

5/00



